## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>7/1/2010</u>	Address:	S. Walnut St
Case #:	<u>33F30279</u>		Bloomington, IN
County:	Monroe		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
Chemic	onal Lab al/Glassware/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☑ Other: Dumpster
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)  Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
∑ Flammable Solvents: <u>dumpster</u>			
Water Reactive Metal (Lithium): <u>dumpster</u>			
Anhydrous Ammonia:			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes _ ⊠ No	er age 18 discovered (check one) (number present) eport to Child Protective Services	Ephedrin	ve Information ne/Pseudoephedrine Tracking Log lerchant Tip formant
This report is to be faxed to the following agencies that serve the location:			
Health Dep	tment: Bloomington Fire Dept partment: Monroe County Health ection Service:	Fax: <u>Hand</u> Fax: <u>812-3</u> Fax:	339-6481
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Jon L. Patrick</u> Phone <u>812-332-4411</u>			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.